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(54) Title: USE OF TERPENES FOR THE TREATMENT OF DIGESTIVE TRACT INFECTIONS

(57) Abstract: The prevention and treatment of digestive tract infections in humans and animals by orally administering a single terpene, a terpene mixture or a liposome-terpene (s) composition before or after the onset of a gastro-intestinal infection is described. Such infections may include traveller's diarrhea, ulcers, anthrax and other bacterial and parasitical infections.

USE OF TERPENES FOR THE TREATMENT OF DIGESTIVE TRACT INFECTIONS

1 2 3 The present invention relates to the treatment of 4 microbial infections, especially the prevention and 5 treatment of digestive tract infections in humans 6 and animals, by orally administering a single 7 8 terpene, a terpene mixture or a liposome-terpene(s) 9 composition before or after the onset of the 10 infection. 11 12 Digestive tract infections are mainly caused by pathogenic and opportunistic microorganisms and 13 toxins produced by them. These illnesses are 14 present in all types of animals and humans. 15 16 17 Diseases caused by organisms pathogenic to humans 18 and animals are very common and encompass a range from the trivial to the lethal. With the arrival 19 20 of the so-called 'antibiotic age' following World War II, it was hoped that the scourge of infection 21

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would be I largely controlled on a permanent basis. 1 2 However, this has not proved to be the case and in recent years many formerly useful prior art 3 4 anti-bacterials have become ineffective as resistance has emerged. In the case of fungal 5 6 infections the armamentarium has always been limited and the need remains for additional and 7 more effective treatments. 8 9 In recent years, a number of particularly difficult. 10 problems have emerged and these have engaged 11 12 considerable public concern. For instance, the rapidly rising prevalence of multiply resistant 13 Staphylococcus aureus (MRSA) in hospitals in 14 Western countries which has led to many deaths and, 15 to all intents and purposes, only Vancomycin now 16 stands as a fall-back treatment. Another example 17 is outbreaks of severe E. coli infection, such as 18 19 that in Scotland in the late nineteen-nineties 20 which killed over 150 people. In the case of E. coli, there are particular problems in respect of 21 treatment in that, even if the organism is killed 22 quickly, the patient may die as the result of 23 endotoxins being released from the organism if it 24 is lysed as a result of anti-microbial attack. 25 26 Not all the mechanisms governing the emergence of 27 resistance to anti-bacterials are understood but 28 sufficient is known to suggest strongly that whilst 29 a fairly simple game of molecular roulette will 30

produce new anti-bacterials, any such product will

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not remain free of resistance for long. Thus, it 1 would appear that any solution to this apparently 2 intractable problem of reduced effectiveness in 3 anti-bacterials would need to be radically 4 different to those employed in the prior art. 5 6 7 Recently with the scare of bio-terrorism there has been an increased concern with pathogens that can 8 produce deadly outbreaks. This is the case with 9 anthrax. Anthrax is considered a potential agent 10 for use in biological warfare. Anthrax is an acute 11 infectious disease caused by the spore-forming 12 bacteria Bacillus anthracis. Anthrax is primarily 13 a disease of domesticated and wild animals, 14 particularly herbivorous animals. Humans become 15 infected with anthrax by handling products from 16 infected animals or by inhaling anthrax spores from 17 contaminated animal products. Anthrax can also be 18 spread by eating undercooked meat from infected 19 animals. Anthrax infection can occur in three 20 forms: cutaneous, inhalation, and gastrointestinal. 21 The most common form is the cutaneous anthrax 22 23 infection, which occurs when bacteria enter a cut 24 or abrasion on the skin. This infection begins as a raised itchy bump that develops into a vesicle 25 26 and then a painless ulcer, usually 1-3 cm in 27 diameter, with a characteristic black necrotic area in the center. About 20% of untreated cases of 28 cutaneous anthrax result in death. Deaths may be 29 30 prevented with prompt antimicrobial treatment.

inhalation form has early symptom similar to a

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1	common cold which progressively results in severe
2	breathing problems. This type of anthrax is
3	usually fatal. The intestinal form is
4	characterized by an acute inflammation of the
5	intestinal tract. The initial signs are nausea,
6	loss of appetite, vomiting, and fever followed by
7	abdominal pain, vomiting of blood and severe
8	diarrhea. Intestinal anthrax results in death in
9	25% to 60% of cases. Anthrax is treated with
10	antimicrobials and can be prevented with
11	vaccination. The Department of Defense in the USA
12	has a mandatory anthrax vaccination of all active
13	military personnel.
14	
15	Another digestive infection in humans is
16	traveller's diarrhea, which affects over seven
17	million visitors to high-risk tropical and
18	semitropical areas every year. Others suggest that
19	the incidence of traveller's diarrhea is 15 - 56%
20	among international travelers. Approximately 1% of
21	the sufferers are hospitalized, at least 20% are
22	confined to bed for a day and nearly 40% have to
23	change plans in their travel itinerary.
24	
25	Traveler's diarrhea, defined as the passage of more
26	than 3 unformed stools in a 24-hour period, is a
27	self-limiting illness lasting 3 - 5 days. The
28	illness may be presented either as (1) acute watery
29	diarrhea (2) diarrhea with blood (dysentery) or (3)

chronic diarrhea, often with clinical nutrient

30 31

malabsorption.

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1	Several factors contribute to the development of
2	diarrhea in travelers, including personal (age,
3	socioeconomic status, body weight, preexisting
4	gastrointestinal illnesses), behavioral (mode of
5	travel, standard of accommodation, eating in public
6	places, dietary errors) and travel related
7	(destination, duration of stay, country of origin,
8	season). Approximately 85% of lithe diarrheas
9	among international travelers are produced by
10	bacterial enteropathogens. These pathogens are
11	usually acquired through ingestion of fecally
12	contaminated food or water. Sometimes dirty hands
13	or insects are the vectors of fecal contamination.
14	Cooked food is safe to consume as long as the
15	temperature at the interior of the food reaches
16	160°F or more. An undercooked hamburger is risky
17	food, because ground meat can become contaminated
18	at the processing plant and during preparation.
19	
20	The common pathogens that produce traveler's
21	diarrhea include Clostridium difficile, Yersenia
22	enterolitica, Shigella sp., Campylobacter sp.,
23	Salmonella sp., ETEC (enterotoxigenic) and EAEC
24	(enteroaggregative) Escherichia coli. Traveler's
25	diarrhea produced by Shigella sp. or Salmonella sp.
26	tend to cause a more severe and longer lasting
27	disease than that caused by the most common cause,

enterotoxigenic E. coli (ETEC). Campylobacter

jejuni is a relativelly common cause of traveler's

diarrhea especially in the winter. Viruses such as

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rotavirus, cytomegalovirus and Norwalk agent are 1 2 less common causes. 3 There are several groups of pathogenic E. coli. 4 They include Enterotoxigenic (ETEC), which produce 5 a range of toxins, heat-stable or heat-labile in 6 7 nature. ETEC is the most common cause of diarrhoea disease in children in the developing world; it 8 also causes many travelers' diarrhoea cases. 9 10 Verocytotoxic E. coli (VTEC) strains produce toxins 11 that destroy the gut mucosa and can cause kidney 12 damage; E. coli 0157 H:7 is the most publicised 13 14 example of this type. 15 Enteropathogenic E. coli (EPEC) do not appear to 16 produce toxins but may attach the microvilli, this 17 group often causes infection in babies and young 18 19 children. 20 Enteroinvasive E. coli (EIEC) attaches to the 21 22 mucosal lining of the large intestine and invade 23 the cells, causing tissue destruction and inflammation. EIEC are usually food borne 24 pathogens and are an important cause of disease in 25 26 areas of poor hygiene. 27 28 The severity of the disease symptoms are dependent on the strain encountered and the underlying health 29 of the individual. EIEC and VTEC strains can cause 30

very serious disease (haemorrhagic colitis and

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renal failure) and require hospitalisation. Milder 1 cases are usually treated by fluid and electrolyte 2 3 replacement and rest. 4 5 The use of antibiotics limits the course of diarrhea to a little over a day compared with an 6 7 average of over 3 - 5 days when diarrhea remains 8 untreated. The widespread resistance of the 9 traditional antimicrobial agent, Trimethoprim plus sulfamethoxazole (TMP/SMX), and fluoroquinolones 10 are the main reasons of concern about the 11 12 continuous use of antimicrobials for the treatment of traveler's diarrhea (Dupont et al, 1998). 13 extensive use of antibiotics can also lead to 14 15 overgrowth syndromes, Candida vaginitis can occur, the overgrowth of Clostridium difficile due to less 16 17 competitive environment in the gastrointestinal 18 tract can also result in diarrhea. 19 20 -Short-term travelers that have experience diarrhea 21 do not develop protection, since it requires 22 continued exposure to enteropathogens to develop 23 immunological protection against traveler's 24 diarrhea. Vaccination is a promising option, but 25 vaccines against all enteropathogens that cause 26 traveler's diarrhea have not been developed. Other 27 protection methods to treat traveler's diarrhea 28 are: the use of nonabsorbed antimicrobials, which 29 have fewer side effects and should be safer to use 30 in children and pregnant women in whom quinolones 31 are contraindicated; antisecretory and antimotility

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1 agent (loperamide); the use of attapulgite, a

- 2 hydrated aluminum silicate clay preparation; and
- 3 probiotics i.e. lactobacillus, which appear to be
- 4 useful in the prevention or treatment of travelers
- 5 diarrhea. In all cases the restoration of water
- 6 and electrolyte balance is necessary. The following
- 7 table shows the current treatments for Traveler's
- 8 Diarrhea:

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Agent	Efficacy	Comments
Activated charcoal	Not	May absorb important
	efficacious	medications
Lactobacillus	Not proven	Safe .
Bismuth	65%	Rinse mouth to avoid
subsalicylate	protective	black tongue
preparations		
Trimethropim-	70-80%	Resistance rising
Sulfamethoxazole	protective	worldwide
Fluoroquinolones	90%	Currently most
(norfloxacin,	protective	effective antimicrobial
ciprofloxacin,	or	but resistance rising
Ofloxacin)	better	worldwide.

10 Ericsson, Charles (1998)

- 12 In humans and animals, peptic ulcers are open sores
- 13 produced by a bacteria. These open sores can be
- 14 present on the entire gastro-intestinal tract,
- 15 mainly esophagus, stomach and proximal part of the
- 16 small intestine. There is evidence that support
- 17 the role of H. pylori as the etiologic agent of
- 18 chronic gastritis and peptic ulcer. H. pylori, a

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- 1 gram-negative, microaerophilic spiral bacteria is
- 2 the major cause of gastro-duodenal disease,
- 3 including chronic gastritis, gastric and duodenal
- 4 ulcers and gastric neoplasia. Greater than 50% of
- 5 North American adults over 50 years of age are
- 6 infected with H. pylori. In contrast, in some
- 7 developing and newly industrialized countries
- 8 virtually all adults are infected. In developing
- 9 countries almost all children are infected by age
- 10 10, whereas in developed countries only the
- 11 children of lower socioeconomic levels are
- 12 infected. H. pylori is characterized by very high
- 13 urease activity that may be associated with
- 14 virulence, in the absence of urea H. pylori is
- 15 sensitive to acidic pH. Urease activity may be an
- 16 important colonization and survival factor by
- 17 generating ammonia in the immediate bacterial
- 18 microenvironment. H. pylori has been classified as
- 19 a type 1 carcinogen by the World Health
- 20 Organization because of the danger of persistent
- 21 infection with the bacterium causing gastric
- 22 cancer. *H. pylori* infection is of extreme
- 23 importance in the causation of peptic ulcer
- 24 disease. By initiating a gastritis or dyspeptic
- 25 symptoms, it can predispose to subsequent episode
- 26 of either gastric lymphoma or stomach cancer.

- 28 The eradication of H. pylori has been obtained with
- 29 combination therapy, triple therapy using bismuth
- 30 plus two antibiotics (metronidazole and either
- 31 amoxicillin or tetracycline has been effective).

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Problems due to development of antimicrobial 1 2 resistant and side effects (diarrhea, nausea, abdominal pain and others) may explain why the use 3 4 of antibiotics has not become a preferred treatment for gastritis and peptic ulcers due to H. pylori. 5 6 7 Antibacterial treatment of H. pylori is difficult because of the habitat occupied by the organism 8 below the layer of the mucus adherent to the 9 gastric mucosa. Access of antibacterial agents to 10 this site is limited from the lumen of the stomach 11 12 and also from the gastric blood supply. 13 The use of medium chain fatty acids and medium 14 15 chain triglycerides has been shown to inhibit the growth of H. pylori in vitro. The mechanism by 16 17 which they exert antibacterial effect is thought to 18 involve: 1) damage to the bacterial outer membrane 19 leading the increase membrane fluidity and 20 permeability, 2) Incorporation of these fatty 21 acids, making the bacterial membrane unstable, 3) 22 Production of peroxides due to oxidation of fatty 23 acids. 24 25 The mode of transmission of H. pylori in humans is 26 still poorly understood. There are reports of 27 detection of this microorganism in the oral cavity 28 and in the feces. If H. pylori is harvested in the 29 oral cavity or bowel, these might represent 30 important reservoir for the reinfection and

transmission with consequences from treatment.

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vector for the transmission of H. pylori are flies, 1 2 they can carry viable H. pylori in their external 3 surfaces and alimentary tracts. 4 5 In animals, the presence of scours in calves is of 6 economic importance. It is estimated that the 7 death lost of calves less than 6 months of age is approximately 2.5% or over 100,000 a year. Most of 8 the mortality and morbidity of the calves are due 9 to infectious diseases, mainly scours. More than 10 90% of scours in calves is produced by E. coli and 11 Salmonella. Clostridia has proved to be fatal in 12 the majority of cases. There are preventive 13 methods like (I) vaccination of the mothers in 14 order to passively transfer antibodies in 15 colostrum; (2) the use of immunological supplements 16 for milk replacers; (3) the use of probiotics to 17 18 create a gastro-intestinal healthy environment (4) 19 changes in calf management. None of these 20 protective measures are 100% effective. 21 Another animal of economic importance is swine. 22 The incidence of diarrhea in neonates and weaned 23 24 piglets is very high. Again, E. coli and 25 Salmonella are the main microorganisms involved in 26 diarrhea in swine. There are losses in the nursery 27 while piglets are still lactating and after weaning. There are similar preventive methods as 28 in calves. One of the preferred methods is 29 segregated early weaning (SEW). The basis of early 30

weaning is that the earlier piglets are weaned from

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the sow the less are the chances of crossover 1 diseases between sow and piglets. This method 2 requires the use of antibiotics. 3 4 In both cases, calf and piglet scours, the 5 preferred method of treatment is antibiotics. 6 European Community has banned the use of 5 7 antibiotics and in the Unites States the FDA is 8 banning the use of fluoroguinolone in animals due 9 to the development of Campylobacter resistant to 10 this antibiotic. Bacteria resistance has 11 encouraged the development of antibiotic-12 alternative products. 13 14 Terpenes are widespread in nature, mainly in plants 15 16 as constituents of essential oils. Their building 17 block is the hydrocarbon isoprene (C5H8)n. Terpenes have been found to be effective and nontoxic 18 19 dietary antitumor agents which act through a variety of mechanisms of action (Crowell and Gould, 20 21 1994 and Crowell et al, 1996). Terpenes, i.e. geraniol, tocotrienol, perillyl alcohol, b-ionone 22 and d-limonene, suppress hepatic HMG-COA reductase 23 activity, a rate limiting step in cholesterol 24 synthesis, and modestly lower cholesterol levels in 25 26 animals (Elson arid Yu, 1994). D-limonene and geraniol reduced mammary tumors (Elegbede et al, 27 1984 and 1986 and Karlson et al, 1996) and 28 29 suppressed the growth of transplanted tumors (Yu et 30 al, 1995).

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- 1 Terpenes have also been found to inhibit the
- 2 in-vitro growth of bacteria and fungi (Chaumont and
- 3 Leger, 1992, Moleyar and Narasimham, 1992 and
- 4 Pattnaik, et al, 1997) and some internal and
- 5 external parasites (Hooser, et al, 1986). Geraniol
- 6 was found to inhibit growth of Candida albicans and
- 7 Saccharomyces cerevisiae strains by enhancing the
- 8 rate of potassium leakage and disrupting membrane
- 9 fluidity (Bard, et al, 1988). B-ionone has
- 10 antifungal activity which was determined by
- 11 inhibition of spore germination, and growth
- 12 inhibition in agar (Mikhlin et al, 1983 and Salt et
- 13 al, 1986). Teprenone (geranylgeranylacetone) has
- 14 an antibacterial effect on H. pylori (Ishii, 1993).
- 15 Solutions of 11 different terpenes were effective
- 16 in inhibiting the growth of pathogenic bacteria in
- 17 in-vitro tests; levels ranging between 100 ppm and
- 18 1000 ppm were effective. The terpenes were diluted
- 19 in water with 1% polysorbate 20 (Kim et al, 1995).
- 20 Diterpenes, i.e. trichorabdal A (from R.
- 21 Trichocarpa) has shown a very strong antibacterial
- 22 effect against H. pylori (Kadota, et al, 1997).

- 24 Rosanol a commercial product with 1% rose oil has
- 25 been shown to inhibit the growth of several
- 26 bacteria (Pseudomona, Staphylococus, E. coli and
- 27 Hpylori). Geraniol is the active component (75%)
- 28 of rose oil. Rose oil and geraniol at a
- 29 concentration of 2 mg/litre inhibited the growth of
- 30 H pylori in vitro. Some extracts from herbal
- 31 medicines have been shown to have an inhibitory

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effect on H. pylori, the most effective being 1 2 decursinol angelate, decursin, magnolol, berberine, cinnamic acid, decursinol and gallic acid (Bae, et 3 4 al 1998). Extracts from cashew apple, anacardic 5 acid and (E)-2-hexenal, have shown bactericidal 6 effect against H. pylori. / **7** There may be different modes of action of terpenes against H. pylori. They could (1) interfere with 8 the phospholipid bilayer of the cell membrane (2) 9 impair a variety of enzyme systems (HMG-reductase) 10 and (3) destroy or inactivate genetic material. 11 12 SUMMARY OF THE INVENTION 13 14 Prevention and treatment of digestive tract 15 infections by orally administering a biocidal 16 terpene, a biocidal terpene mixture or a 17 liposome-terpene(s) composition before of after the 18 19 onset of the infection. 20 DESCRIPTION OF THE PREFERRED EMBODIMENTS 21 22 Digestive tract infections not only are an 23 uncomfortable illness for humans but also are of 24 25 economic importance for the animal industry. 26 some cases the illness can cause death in children, 27 elderly and immune-compromised people. preferred treatment of the disease is antibiotics. 28 The extensive use of antibiotics in humans and the 29 animal industry has created the development of 30

antibiotic-resistant bacteria. The increased

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- 1 antibiotic resistance has beer the main reason to
- 2 seek new antimicrobial alternatives. The European
- 3 Community has banned the use of 5 antibiotics in
- 4 animals and in the Unites States the FDA is banning
- 5 the use of fluoroquinolone in animals due to the
- 6 development of Campylobacter resistant to this
- 7 antibiotic.
- 8 Terpenes, which are GRAS (Generally Recognized As
- 9 Safe) have been found to inhibit the growth of
- 10 cancerous cells, decrease tumor size, decrease
- 11 cholesterol levels and have a biocidal effect on
- 12 microorganisms in vitro. Onawunmi (1989) showed
- 13 that growth media with more than 0.01 % citral
- 14 reduced the concentration of E. coli and at 0.08%
- 15 there was a bactericidal effect. Barranx, et al
- 16 (1998) teach us a terpene formulation, based on
- 17 pine oil, used as a disinfectant or antiseptic
- 18 cleaner. Koga, et al (1998) teach that a terpene
- 19 found in rice has antifungal activity. Iyer, et al
- 20 (1999) teach us an oral hygiene antimicrobial
- 21 product with a combination of 2 or 3 terpenes that
- 22 showed a synergistic effect. Neither of them
- 23 suggested the use of a terpene, terpene mixture or
- 24 liposome-terpene(s) combination for the prevention
- 25 or treatment of gastro-intestinal infections i.e.
- 26 traveler's diarrhea.

- 28 Several US Patents (US#5,547,677, US#5,549,901,
- 29 US#5,618,840, US#5,629,021, US#5,662,957,
- 30 US#5,700,679, US#5,730,989) teach us that certain

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1 types of oil-in-water emulsions have antimicrobial, 2 adjuvant and delivery properties. 3 4 Thus, the present invention provides a composition 5 for preventing or treating gastro-intestinal infections, wherein said composition comprises a 6 7 terpene or a mixture of terpenes. We have found 8 that certain mixture of terpenes are 9 synergistically effective, relative to the effects of the component terpenes administered separately. 10 11 Thus terpenes having biocidal activity which in 12 combination with two or more other terpenes 13 synergistically increase the biocidal effectiveness are of especial interest. 14 15 16 One composition of interest comprises a mixture of 17 carvone and geraniol, optionally together with 18 other terpenes. The content of carvone and 19 geraniol may each be from 10 to 90% (by weight), 20 but is preferably 10 to 60% by weight. Other 21 terpenes which may be present include citral, b-22 ionone, eugenol, terpeniol, carvacrol, anethole or 23 the like. These optional additional terpenes may 24 be present at 5 to 50% by weight, for example 10 to 25 40% by weight. Optionally, the terpenes may be presented in the form of liposomes.

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30 Liposomes are microscopic structures consisting of

31 concentric lipid bilayers enclosing an aqueous

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1	space. Liposomes are classically prepared from
2	phospholipids which occur naturally in animal cell
3	membranes, but several synthetic formulations are
4	now commonly used. The lipid composition of the
5	liposome can be varied to give liposomes different
6	physical characteristics i.e. size and stability.
7	Liposomes can be prepared by the reverse-phase
. 8	evaporation or dehydration-rehydration vesicle
9	methods using a mixture of dipalmitoyl phosphatidyl
10	choline, cholesterol, dipalmitoyl phosphatidyl
11	glycerol, dipalmitoyl phosphatidyl ethanolamine and
12	other synthetic fatty acids and emulsifiers. When
13	making liposomes first multilamellar vesicles are
14	formed spontaneously when amphipathic lipids are
15	hydrated in an aqueous medium. Unilamellar vesicles
16	are often produced from multilamellar vesicles by
17	the application of ultrasonic waves.
18	
19	Multilamellar vesicles can be prepared by the
20	procedure known as dehydration-rehydration.
21	Briefly, egg phosphatidylcholine and cholesterol
22	are mixed in chloroform, dried in a rotary
23	evaporator, dilute with water and sonificated to
24	form unilamellar vesicles. The solution is freeze
25	dried and rehydrated with the terpene solution in
26	order to embed the terpene inside the liposome.
27	Another method to produce liposomes is by mixing
28	together lipids, an emulsifier and the terpenes.
29	The emulsion is obtained by using a Polytron
30	homogenizer with special flat rotor that creates an

emulsion. The lipids could consist of soybean oil,

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1 any commercial or pharmaceutical oil; the 2 emulsifier consist of egg yolk lecithin, plant 3 sterols or synthetic including polysorbate-80, 4 polysorbate-20, polysorbate-40, polysorbate-60, 5 polyglyceryl esters, polyglyceryl monooleate, 6 decaglyceryl monocaprylate, propylene glycol dicaprilate and triglycerol monostearate. The 7 8 . lipid concentration in the oil phase is 75-95% and 9 the emulsifier concentration from 5-25%. When preparing the emulsion a ratio oil to water could 10 vary from 10-15 parts lipid to 35-40 parts terpenes 11 12 diluted in water at a concentration of 0.5% to 50%. Once the emulsion is formed this is combined with a 13 14 carrier in order to be use as a humectant, cream or 15 other suitable carrier for topical applications. The emulsion concentration use for topical 16 17 application varies from 0.0055 through 1.0% of the 18 final product. Several modifications to the 19 emulsion can be achieved by simply varying the 20 concentration and type of terpenes used. This modification can give us different products with 21 different antimicrobial specificity. 22 23 24 By encapsulating terpenes within these emulsions the antimicrobial effect will be increased: (1) the 25 26 liposome will disrupt the bacterial membrane and 27 (2) the terpenes will be more effective in disrupting cytoplasmatic enzymes. 28

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30 It will be apparent for those skilled in the art

31 that the aforementioned objects and other

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advantages may be further achieved by the practice 1 2 of the present invention. 3 EXAMPLE 1: Preparation of the terpene mixture 4 5 The terpene, terpene mixture or liposome-terpene(s) б 7 combination consists of a blend of generally recognized as safe (GRAS) terpenes with a GRAS 8 9 surfactant. The ratio of terpenes is from 1-99% and the surfactant ratio from 1-99% of the mixture. 10 The terpenes, comprised of natural or synthetic 11 12 terpenes, are citral, b-ionone, geraniol, eugenol, carvone, terpeniol, carvacrol, anethole or other 13 terpenes with similar properties. The surfactant is 14 15 preferably polysorbate-80 or other suitable GRAS 16 surfactants. 17 EXAMPLE 2: Preparation of liposomes containing 18 19 terpenes 20 21 Any standard method for the preparation of 22 liposomes can be followed with the knowledge that 23 the lipids used are all food-grade or pharmaceutical-grade. A set amount of lipids, an 24 emulsifier and the terpenes was used to prepare an 25 emulsion. The emulsion was obtained by using a 26 Polytron homogenizer with special flat rotor that 27 created an emulsion. The lipids consisted of 28 29 soybean oil, any commercial or pharmaceutical oil; 30 the emulsifier consist of egg yolk lecithin, plant 31 sterols or synthetic emulsifiers including

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polysorbate-80, polysorbate-20, polysorbate-40, 1 polysorbate-60, polyglyceryl esters, polyglyceryl 2 monooleate, decaglyceryl monocaprylate, propylene 3 glycol dicaprilate and triglycerol monostearate. A 4 solution containing 75-95% lipids (oil) and 5-25% 5 emulsifier consisted of the oil phase. The aqueous 6 phase consisted of the terpene diluted in water at 7 a rate of 0.5% to 50%. To form the emulsion a 8 ratio of oil to water varying from 10-15 parts 9 lipid (oil phase) to 35-40 parts terpenes (aqueous 10 phase) was mixed. Any standard method for the 11 preparation of liposomes can be followed with the 12 knowledge that the lipids used are all food-grade 13 or pharmaceutical-grade. The suspension containing 14 a lipid, an emulsifier and the terpenes is 15 emulsified with a Posytron homogenizer until a 16 complete milky solution is obtained. 17 18 19 EXAMPLE 3: Preparation of liposomes 20 21 This step consists of the preparation of the 22 terpene(s)-liposome combination by mixing 99% of liposome and 1% of terpene mixture. Several 23 24 combinations of this formulation can be obtained by varying the amount of terpene and liposome from 1% 25 to 99%. The liposomes are prepared as in Example 2 26 without the addition of terpenes in the 27 28 formulation. 29 EXAMPLE 4: In-vitro effectiveness of terpenes 30

against E. coli

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- 1 This example demonstrates the effect of terpenes on
- 2 the cell membrane fragility of E. coli, which is
- 3 considered indicative of other pathogenic bacteria
- 4 such as Salmonella and Listeria. Lysis of the cell
- 5 membrane was monitored by the determination of
- 6 galactosidase activity. β -galactosidase is a
- 7 well-characterized cytosolic enzyme in bacteria.
- 8 This enzyme is inducible in the presence of
- 9 isopropyl-1-thiogalactosidase (IPTG) and assayed
- 10 colorimetricaly with substrate
- 11 o-nitro-phenyl- β -D-galactoside (ONPG). ONPG is
- 12 cleaved to release o-nitrophenol with peak
- 13 absorbance at 420 nm. Since intact E. coli is
- 14 impermeable to both ONPG and the enzyme, the cells
- 15 have to be lysed prior to enzymatic assay.
- 16 Therefore the ability of terpenes to lyse E. coli
- 17 can be measured with this enzymatic assay and
- 18 compared to known lysing agents.

- 20 The procedure used was as follows: E. coli strains
- 21 AW574 or AW405 were cultured overnight in 10 ml
- 22 tryptone broth with 1 nM IPTG at 35°C. Cells were
- 23 allowed to grow until an absorbance equal to 0.9
- 24 was reached. Cells were harvested, washed with
- 25 phosphate buffer and resuspended to an absorbance
- 26 equal to 0.5. 0.1 ml of the bacteria culture was
- 27 added to 0.9 ml of buffer, warmed to 30°C and then
- 28 80 µl of terpenes (85% terpenes and 15%
- 29 polysorbate-80), 80 μl water (background) or 40 μl
- 30 chloroform plus 40 µl 1% SDS in water (positive

1	control) were added. After the addition of the
2	lysing agents the tubes were mixed for 10 seconds
3	and 0.2 ml of ONPG (4 mg/ml water) was added, then
4	incubated for 5 minutes. The enzyme activity was
5	stopped with 0.5 ml of 1 M sodium carbonate. After
6	being centrifuged for 3 minutes at $1,500 \times g$,
7	supernatant was transferred to cuvettes and read at
8	420 nm. The relative degree of lysis caused by
9	terpenes was calculated as follows:
10	
11	100 x (OD terpenes-OD water) / (OD chloroform-OD
· 12	water)
13	
14	This shows that dosages can be manipulated to
15	either lyse the cell outright, or in the case of
16	lower dosages, stop bacterial growth without lysis
17	of the cell membrane. The advantage of this
18	controllable result is the ability to prevent lysis
19	and the resultant release of endotoxins where
20	contraindicated.
21	
22	
23	
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25	
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30	
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2,3

1 Table 1: Lysis of E. coli by Terpenes

Terpenes (µM)		Relative lysis %
Carvone	404,000	NM*
	40,400	54
	4,040	22
	404	3.2
Geraniol	363,000	NM
	36,300	.96
	3,630	98
	363	34
	36.3	4
	3.63	2.4
b-Ionone	308,000	NM
	30,800	NM
	3,080	NM
	308	52
	30.8	44
	3.08	23
	0.308	4.78
	0.0308	1.3
80 µl Polysor	bate-80	3.2
80 µl Polysor	bate-80 +	100
SDS + Chlorof	orm	200
SDS + Chlorof	orm	100*

^{3 *}Lysis due to chloroform and SDS combination was

⁴ considered to be 100%.

^{5 *}NM, not measurable due to formation of turbid

⁶ colloidal solution.

24

EXAMPLE 5: In in-vitro effectiveness of terpenes 1 2 against several microorganisms 3 4 This example demonstrate the effectiveness of 5 terpenes against Escherichia coli, Salmonella typhimurium, Pasteurella mirabilis, 6 Staphylococcus aureus, Candida albicans and 7 Aspergillius fumigates. Each organism, except A. 8 fumigatus, was grown overnight at 35-37°C in 9 tryptose broth. A. fumigates was grown for 48 10 hours. Each organism was adjusted to approximately 11 10⁵ organisms/ml with sterile saline. For the 12 broth dilution test, terpenes were diluted in 13 sterile tryptose broth to give the following 14 dilutions: 1:500, 1:1000, 1:2000, 1:4000, 1:8000, 15 16 1:16,000, 1:32,000, 1:64,000 and 1:128,000. 17 Each dilution was added to sterile tubes in 5 ml 18 19 amounts. Three replicates of each series of 20 dilutions were used for each test organism. 0.5 ml 21 of the test organism was added to each series and incubated at 35-37°C for 18-24 hours. After 22 incubation the tubes were observed for growth and 23 plated onto blood agar. The tubes were incubated 24 an additional 24 hours and observed again. The A. 25 fumigates test series was incubated for 72 hours. 26 The minimum inhibitory concentration for each test 27 organism was determined as the highest dilution 28 that completely inhibits the organism. 29 30

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25

1 Table 2: Results of the inhibitory activity of

2	different	dilutions
_	ULLITERETTE	GTTGCTOHS

	Visual assessment			Growt	h afte				
	of			subci	ılture	Mean			
Omeaniam	growth *			agar	plates	inhibitory			
Organism					-		dilution		
	1	2	3	1 .	2	3			
S. typhimurium	500·	500	500	500	500	500	500		
E.coli	1000	1000	1000	1000	1000	1000	1000		
P. mirabilis	1000	1000	1000	1000	1000	1000	1000		
S.aureus	1000	1000	1000	1000	1000	1000	1000		
C albicans	1000	1000	1000	1000	1000	1000	1000		
A. fumigatus	8000	16000	16000	8000	16000	16000	13300		
* The results of the triplicate tests with each organism as									
the reciprocal	of the	e dilu	tion t	hat s	howed				

inhibition/killing

3 4

5 EXAMPLE 6: In in-vitro effectiveness of terpenes

against Escherichia coli over time. 6

7

8 This example demonstrates the effectiveness of

- 9 terpenes at several concentrations against
- Escherichia coli and cultured over time. Terpene 10
- dilutions (1:500, 1:1000, 1:2000, 1:4000, 1:8000, 11
- and 1:16,000) were prepared in BHI broth and in 12
- 13 saline. These were prepared in 25 ml amounts. E.
- 14 coli was grown overnight in BHI broth and diluted
- 15 to a MacFarland 0.5 concentration in saline. This
- solution was diluted 1:100 to be used to inoculate 16

^{**} NI = not inhibited

26

- 1 (0.5 ml) each terpene dilution tube. The series
- 2 that contained the terpene dilution in BHI was
- 3 tested at 30 min, 90 min, 150 min and 450 min.
- 4 Each tube was mixed and serially diluted in saline.
- 5 0.5 ml of each dilution was spread plated onto
- 6 MacConkey (MAC) agar plates. Also, 3 drops of the
- 7 undiluted and the 1:100 dilution was added into
- 8 respective tubes of BHI broth. The tubes and
- 9 plates were incubated overnight at 35°C. The
- 10 series that contained the terpene's dilution in
- 11 saline were tested at 60 min, 120 min, 180 min and
- 12 480 min. Each tube was mixed and serially diluted
- 13 in saline. 0.5 ml of each dilution was spread
- 14 plated onto MacConkey (MAC) agar plates. Also, 3
- 15 drops of the undiluted and the 1:100 dilution were
- 16 added into respective tubes of BHI broth. The
- 17 tubes and plates were incubated overnight at 35°C.

18

- 19 Table 3: Subculture from the tubes containing
- 20 various dilutions of terpenes in broth

Time	Dilution	1:500	1:1000	1:2000	1:4000	1:8000	1:1	6,000
30 min	Undiluted	NG	+	+	+	+		+
	1:100	NG	+	+	+	+		+
90 min	Undiluted	NG	NG	+	+	+		+
	1:100	NG	NG	NG	+	+		+
150	Undiluted	NG	NG	+	+	+		+
min	1:100	NG	NG	NG	+	+		+
450	Undiluted	NG	NG	+	+	+		+
min	1:100	NG	NG	+	+	+		+

21 NG: no growth, +: growth

1 Table 4: Subculture from the tubes containing

2 various dilutions of terpenes in saline

3

Time	Dilution	1:500	1:1000	1:2000	1:4000	1:8000	Control
60 min	Undiluted	NG	+	+	+	+	+
	1:100	NG	NG	NG	+	+	+
120 min	Undiluted	NG	NG	NG	+	+	+
	1:100	NG	NG	NG	NG	+	+
180 min	Undiluted	NG	NG	NG	+	+	+
	1:100	NG	NG	NG	NG	+	+
480 min	Undiluted	NG	NG	NG	NG	+	+
	1:100	NG	NG	NG	NG	NG	+

MG: no growth, +: growth

5

6 Table 5: The quantitative results of the activity

7 of various terpene dilutions against E.coli

8 (cfu)

Media	Time	1:500	1:1000	1:2000	1:4000	1:8000	Control
	30 min	0	0	660	3600	3600	4600
Broth	90 min	0	0	12	4600	5400	7600
Broom	150 min	0	0	10	8000	12,000	14,000
	450 min	0	0	15,000	28×10^{3}	23×10^{7}	16 x 10 ⁸
	60 min	0	4	140	4000	2000	1300
Saline	120 min	0	0	0	90	3800	2600
Dui III	180 min	0	0 .	0	2	2000	5000
	480 min	0	0	0	0	104	8000

9 NG: no growth, +: growth

10

11

28

EXAMPLE 7: In vitro effectiveness of selected 1 2 terpenes on Helicobacter pylori. 3 This example shows the bactericidal effect of 4 5 selected terpenes on the viability of H. pylori. Five terpenes (anethole, carvone, citral, geraniol 6 and b-ionone) were used for this study. Terpenes 7 were mixed to a ratio of 90% terpene plus 10% 8 polysorbate-80. The H. pylori, used was strain #26695 of porcine origin, this bacteria is a 10 motile, cag A, vac A cytotoxin-positive gram 11 negative bacteria which colonizes gnotobiotic 12 piglets and indefinitely persists within the 13 14 gastric microenvironment as a superficial infection of the gastric mucosa and mucus layer. 15 16 17 The study was as follows: 18 19 1) Stock solutions of each terpene with 20 polysorbate-80 were prepared (1.8 ml terpene plus 0.2 ml polysorbate-80). 21 22 2) Stock solutions were diluted in Brucella broth 23 10% (v/v) fetal calf serum to a final concentration 24 25 of stock at 1:10, 1:50, 1:100, 1:500, 1:1000, 1:5000 and 1:10000. Controls consisted of 10% 26 27 (v/v) polysorbate-80 in Brucella broth, Brucella broth alone and bacteria in Brucella broth. 28 29 3) A total of 1.0 x 10^6 bacteria (30 μ l) was added 30 to 970 ul terpene dilutions (final volume of 1.0 31

29

- 1 ml) in loosely capped tubes and incubated for 24
- 2 hours at 37 °C with continuous mixing.

3

- 4 4) Duplicate samples (0.1 ml) from each test
- 5 dilution was titrated onto blood agar plates and
- 6 incubated for 48 hours at 37°C on 10% CO2
- 7 environment. Bacterial colony forming units (cfu)
- 8 were determined by visual (counting) inspection.
- 9 Recovered bacteria were confirmed to be H. pylori
- 10 by catalase and urease enzyme activities.

11

12 The results are summarized in the following table:

13

14 Table 6: Effect of different terpenes on H. pylori

15 growth

		Final dilution tested for antimicrobial effects against 10 ⁶ cfu							
	ayaıı	ist IV	CLU						
Terpene	1:10	1:50	1:100	1:500	1:1000	1:5000	1:10000	1:50000	
Polysorbate	NG*	NG	NG	10 ³	104	TNTC**	TNTC	TNTC	
-80									
Anethole	NG	NG	NG	NG	10 ³	10 ³	TNTC	TNTC	
Carvone	NG	NG	NG	NG	NG	104	TNTC	TNTC	
Geraniol ·	NG	NG	NG	NG	NG	NG	10 ²	TNTC	
Citral	NG	NG	NG	NG	NG	NG	NG	TNTC	
b-ionone	NG	NG	NG	NG	NG	NG	NG	TNTC	

16 * NG = no growth ** TNTC = Too Numerous To Count

17

- 18 EXAMPLE 8: In vitro effectiveness of single or
- 19 combination of terpenes against E. coli.

- 21 The objective of this example was to determine an
- 22 optimum terpene mixture which could have a greater

1	biocidal effect. E. coli strain AW574 was grown in
2	tryptone broth to an exponential growth phase (O.D.
3	between 0.4 and 1.0 at 590 nm). One tenth of this
4	growth was inoculated to 10 ml of tryptone broth
5	followed by the addition of individual terpenes as
6	indicated in Example 5; then incubated for 24 hours
7	at 35-37°C and the O.D. determined in each tube.
8	The concentration of terpenes was 1 or 2 μ Mo1.
9	Each treatment was repeated in triplicate. The
10	results are expressed as percentage bacterial
11	growth as compared to the control treatment. It is
12	observed that the combination of terpenes give
13	better biocidal effect than single terpenes, with
14	geraniol and carvone better than b-ionone.
15	
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26	·
27	
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30	·
31	

31

1 Table 7: Effect of single terpene or their

2 combination against on E. coli growth

3

µMol terpe	% Growth				
B-ionone	onone Carvone Geraniol		7		
0	0	0	100.00		
2	Ō	0	84.00		
0	2	0	63.00		
o	0	2	54.00		
1	1	1	41.00		
1	2	1	31.10		
1	1	2	14.80		
1	2	2	15.90		
2	1	1	48.60		
2	2	1	44.30		
2	1	2	30.20		
2	2	2	1.50		

4 5

EXAMPLE 9: In vitro effectiveness of a combination

6 of terpenes against different E. Coli strains

7

8 Both well-test and broth test methods were used to

- 9 assess the effect of terpene formulations against a
- 10 variety of strains of E. coli. The broth test
- 11 method was judged to be a more applicable
- 12 simulation of gastrointestinal tract conditions
- 13 than the well plate (zone of inhibition) method. A
- 14 series of broth tests was conducted on a selected
- 15 test formulation to determine its activity in an
- 16 aqueous environment.

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32

1	Test micro-organisms
2	
3	Bacteria were sub-cultured from original American
4	Type Culture Collection (ATCC) freeze-dried
5	material. They included E. coli strains 8739,
б	25922 and 700728 (Serotype group O: 157 H:7), which
7	are BioSafety class 1 organisms and E. coli 12795
8	(Serotype group O: 26) which is a BioSafety class 2
9	organism. All the bacteria were cultured on
10	Tryptone Soya Agar (TSA), supplied by Oxoid Ltd,
11	Hampshire and Mueller Hinton Agar (MHA), supplied
12	by Merck Ltd. The incubation temperature was
13	35 °C.
14	
15	Broth Test Procedure
16	
17	E. coli cultures were prepared in nutrient broth
18	and allowed to grow until exponential growth phase
19	was achieved (16 hours at 35 °C). 1 ml of this
20	culture was transferred to each of a series of
21	pre-sterilised Duran bottles containing 100 ml
22	nutrient broth, 0.5 % w/v Polysorbate 80 and this
23	gave an initial inoculum of approximately 10^8
24	microbial cells per ml of broth.
25	
26	The Duran bottles were agitated on a vortex shaker
27	to produce good mixing and the Optical Density (OD)
28	at 590 nm read on a calibrated Unicam UV 300
29	spectrophotometer controlled by Vision 32 software.
30	The OD of a sample of a placebo broth was also

31 recorded.

33

- 1 The bottles were then placed in an incubator at
- 2 35°C. The bottles were removed at 30 minute
- 3 intervals and placed on a vortex shaker at level
- 4 three for 30 seconds. The bottles were then
- 5 returned to the incubator. The OD was recorded at
- 6 hourly intervals, for up to 24 hours.

7

- 8 After completion of the tests, the broths were
- 9 autoclaved on programme 4 of an AVX240 autoclave
- 10 (132 °C for 30 minutes) to sterilise them.

11

- 12 The terpenoids tested in this series of exemplary
- 13 experiments included I-carvone, citral and geraniol
- 14 in varying proportions. One exemplary formulation,
- 15 constituting the test formulation, is given in
- 16 Table 8, below

17

Table 8	% w/w
I-Carvone	40
Citral	40
Geraniol	15
Polysorbate 80	, 5
Total	100

18

- 19 This exemplary test formulation was highly active
- 20 and clear inhibition of E. coli growth was observed
- 21 in broth tests conducted at 50 μl and 100 μl doses
- 22 in 100 ml broth.

23

24

34

1 Table 9: E. coli 8739 Broth Test of Formulation

2 (Optical Density at 590 nm)

Time Post Inoculation	Volume of Test Formulation (µ1)						
	500	100	50	10	5	Control	
0	0.958	0.063	0.019	0.007	0.007	0.003	
1	0.708	0.025	0.028	0.024	0.021	0.022	
2	0.762	0.023	0.053	0.081	0.087	0.102	
3	0.547	0	0.094	0.158	0.179	0.191	
4	0.486	0	0.140	0.270	0.286	0.323	
5	0.594	0	0.181	0.316	0.311	0.345	
6	0.522	0.011	0.238	0.361	0.367	0.401	
6.5	0.579	0.014	0.262	0.376	0.372	0.411	
23	0.617	0.031	0.285	0.619	0.747	0.654	
24	0.553	0.058	0.286	0.606	0.740	0.683	

4

5 The 16 hour old *E. coli* culture used as the

6 inoculum had an OD at 590 nm of 0.697 units.

7

8 Further broth tests were conducted against two

9 pathogenic strains of *E. coli* (700728, 12795) and

10 an antimicrobial agent test strain at 50 μ l and 100

11 μ1.

12

13

14

Table 10: ODs at 16 hours	of E. coli Cultures used						
as the Inoculum for the Multi-Strain							
Broth Test							
E.coli test strain	Optical density at						
E.COII test strain	590 nm (absorbance units)						
25922	0.852						
700728	0.423						
12795	0.395						

Fime										
Post	E. coli strain/Volume of Test formulation (μl)									
Inocul-										
ation										
(hours)										
	25922	25922			700728			12795		
	0	50	100	0 .	50	100	0	50	100	
0	0.006	0.040	0.088	0.006	0.032	0.077	0.005	0.040	0.074	
1	0.034	0.021	0.031	0.020	0.030	0.028	0.017	0.024	0.035	
2	0.129	0.039	0.017	0.075	0.055	0.023	0.055	0.046	0.02	
3	0.263	0.074	0.018	0.197	0.106	0.013	0.133	0.101	0.02	
4	0.365	0.0138	0.011	0.335	0.188	0.019	0.311	0.198	0.04	
5	0.366	0.174	0.004	0.312	0.240	0.050	0.364	0.205	0.04	
6	0.395	0.234	0.009	0.371	0.264	0.044	0.399	0.264	0.03	
7	0.427	0.256	0.009	0.406	0.287	0.040	0.436	0.282	0.04	
23.5	0.688	0.351	0.049	0.545	0.323	0.096	0.564	0.296	0.07	
24.5	0.683	0.349	0.054	0.561	0.323	0.106	0.582	0.279	0.08	

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31

36

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Table 9 summarises the results of the 50 and 100 1 μ l/100 ml broth test. These results indicated good 2 activity against E. coli 8739. Table 11 indicates 3 that the test formulation showed good activity when 4 challenged with other strains of E. coli including 5 6 two pathogenic strains 700728, 12795. 7 8 The 100 µl dose of the test formulation had the 9 lowest OD readings, therefore indicating greater inhibition of cell proliferation. 50 μ l/100 ml 10 11 broth of the test formulation appeared to have both slowed cell proliferation and reduced the final 12 number of cells present in the broth. Where no 13 test formulation was present, growth was rapid for 14 all strains tested, especially in the first 4 hours 15 after inoculation. 16 17 18 The test formulation is only one of a range of 19 terpene formulations investigated so far and it is clearly very active. Clear inhibition of E. coli 20 growth has been observed in broth tests conducted 21 22 at 50 μ l and 100 μ l/100 ml broth, both against anti 23 microbial assay strains and against pathogenic 24 strains. 25 26 Formulations have been developed now which show 27 very great activity against potentially lethal 28 strain 0157: H7 of E. coli, both at very high 29 innocula which are not sustainable in life and at 30 levels which, though likely to be fatal, are found.

Three 100 ml bottles were each filled with McConkey

37

- broth to which was added one of either 20 μg/ml
 oxacillin, or 10 μg/ml of amoxicillin, or 1 μg/ml
- 2 Oxacifility of to pg/mit of amonactifity of a pg/mit
- 3 of the exemplary test terpene formulation. Each
- 4 bottle was then inoculated with 104 E. coli
- 5 0157:H:7 and incubated for 24 hours at 35°C.
- 6 Following incubation, the McConkey broth containing
- 7 the oxacillin had lost its magenta colour and
- 8 become yellowish and turbid, indicating that the
- 9 antibiotic had been overwhelmed by the E. coli. The
- 10 McConkey broth in the bottle containing the
- 11 amoxicillin had only slightly reduced magenta
- 12 colour, indicating that the antibiotic had
- 13 contained the E. coli, whereas the McConkey broth
- 14 in the bottle containing the terpene sample had an
- 15 undiminished magenta colour.

16

- 17 This experiment was then repeated under the same
- 18 conditions, except that the inoculum of E. coli
- 19 0157:H:7 was 108. In this case, both the oxacillin
- 20 and amoxicillin samples were overwhelmed but the
- 21 McConkey broth in the bottle containing the terpene
- 22 sample had an undiminished magenta colour,
- 23 indicating that, even with this extremely high
- 24 inoculum, no growth had occurred.

- 26 Experiments have been carried out on xanthomonads
- 27 including assay strains such as Xylefa maltifolia
- 28 and plant pathogens such as X. fastidiosa. The
- 29 latter causes Pierce's disease which has devastated
- 30 grape culture in Southern California and threatens
- 31 the wine growing areas of Napa Valley and Sonoma

38

- 1 Valley. The organisms are highly susceptible to
- 2 terpene formulations according to the present

3 invention.

4

- 5 It will be apparent for those skilled in the art
- 6 that a number of modifications and variations may
- 7 be made without departing from the scope of the
- 8 present invention as set forth in the appending
- 9 claims.

39

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1 CLAIMS 2 3 An antimicrobial composition for preventing or treating digestive tract infections, said 4 composition comprising a terpene or a mixture of 5 6 two or more terpenes. 7 8 The composition as claimed in Claim 1 which 9 comprises a mixture of the terpenes carvone and 10 geraniol. 11 12 The composition as claimed in either one of 13 Claims 1 and 2 which further comprises a 14 surfactant. 15 16 4. The composition of Claim 3 which consists of 1 to 17 99% terpenes and 1 to 99% surfactant. 18 The composition as claimed in either one of 19 Claims 3 and 4 wherein the terpene or terpene 20 21 mixture are natural or synthetic terpenes selected from citral, b-ionone, geraniol, 22 23 carvacrol, eugenol, carvone, terpeniol, anethole 24 or other generally recognized as safe terpenes with biocidal properties, and the surfactant is 25 selected from polysorbate-80, polysorbate-20, 26 polysorbate-40, polysorbate-60, polyglyceryl 27 esters, polyglyceryl monooleate, decaglyceryl 28 29 monocaprylate, propylene glycol dicaprilate, 30 triglycerol monostearate or their combination. 31

1 6. The composition as claimed in any one of Claims
2 1 to 5 wherein the terpene or terpene mixture is
3 at least partially encapsulated in a liposome to
4 form a liposome-terpene(s) combination.

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7. The composition as claimed in Claims 1 to 6 wherein the terpene, terpene mixture or the liposome-terpene(s) combination is part of the inner core of a gelatin or cellulose capsule.

9 10

11 8. The composition as claimed in Claims 1 to 6

12 wherein the terpene, terpene mixture or the

13 liposome-terpene(s) combination is freeze dried,

14 spray dried or dried in order to form a powder

15 for encapsulation or solubilization.

16

9. The composition as claimed in Claims 1 to 6
wherein the terpene, terpene mixture or the
liposome-terpene(s) combination is freeze dried,
spray dried or dried in order to be compressed
in pill or tablet form.

22

23 10. The composition as claimed in Claims 1 to 6
24 wherein the terpene, terpene mixture or the
25 liposome-terpene(s) combination is freeze dried,
26 spray dried or dried in order to be compressed
27 in pill/tablet and coated for absorption in
28 different areas along the gastro-intestinal
29 tract.

30

31 11. A method to prevent or treat microbial32 infections of the digestive tract, said method

1		comprising orally administering a composition as
2		claimed in any one of Claims 1 to 10 to patient.
3	12.	The method as claimed in Claim 11 wherein the
4		digestive tract infections are produced by
5		normal, pathogenic or opportunistic
6		microorganisms or its toxins selected from
7		Aerobacter sp., Aspergillus sp., Bacillus sp.,
8		Campylobacter sp., Candida sp., Clostridia sp.,
9		Enterobacteriaceae sp., Enterococcus sp.,
10		Escherichia sp., Haemophilus sp., Helicobacter
11 .		sp Klebsiella sp., Lactobacillus sp., Listeria
12 .		sp., Propionibacter sp., Pasteurella sp.,
13		Proteus sp., Pseudomonas sp., Salmonella sp.,
14		Shigella sp., Staphylococcus sp., Streptococcus
15		sp. and Yersennia sp.
16		
17	13.	The method as claimed in Claim 11 wherein the
18		terpene, terpene mixture or the
19		liposome-terpene(s) combination is effective
2.0		against pathogenic and normal microflora
21		comprising of Aerobacter sp., Aspergillus sp.,
22		Bacillus sp., Campylobacter sp., Candida sp.,
23		Clostridia sp., Enterobacteriaceae sp.,
24		Enterococcus sp., Escherichia sp., Haemophilus
25		sp., Helicobacter sp Klebsiella sp.,
26		Lactobacillus sp., Listeria sp., Propionibacter
27		sp., Pasteurella sp., Proteus sp., Pseudomonas
28	,	sp., Salmonella sp., Shigella sp.,
29		Staphylococcus sp., Streptococcus sp. and
30		Yersennia sp.
31		

1	14.	The method as claimed in Claim 11 wherein the
2		terpene, terpene mixture or the
3		liposome-terpene(s) combination is effective
4		against pathogenic and opportunistic
5		microorganisms causing traveler's diarrhea.
6		
7	15.	The method as claimed in Claim 11 wherein the
8		terpene, terpene mixture or the
9		liposome-terpene(s) combination is effective
10		against pathogenic and opportunistic
11		microorganisms causing ulcers along the
12		digestive tract.
13		
14	16.	The method as claimed in Claim 11 wherein the
15		terpene, terpene mixture or the
16		liposome-terpene(s) combination is effective
17		against anthrax.
18		
19	17.	The method as claimed in Claim 11 wherein the
20		terpene, terpene mixture or the
21		liposome-terpene(s) combination is effective
22		against pathogenic and opportunistic
23		microorganisms causing scours in calves.
24		•
25	18.	The method as claimed in Claim 11 wherein the
26		terpene, terpene mixture or the
27		liposome-terpene(s) combination is effective
28		against pathogenic and opportunistic
29		microorganisms causing scours in neonates and
30		weaned piglets.

1	19.	The method as claimed in Claim 11 wherein the
2		terpene, terpene mixture or the
3		liposome-terpene(s) combination at lower
4		concentrations has a bacteriostatic effect
5		against pathogenic and normal gastro-intestinal
6		microflora.
7		
8	20.	The method as claimed in Claim 11 wherein the
9		terpene, terpene mixture or the
10		liposome-terpene(s) combination at higher
11		concentrations has a bactericidal effect against
12		pathogenic and normal gastro-intestinal
13		microflora.
14		
15	21.	The method as claimed in any one of Claims 11 to
16		20 wherein the effective dose of the terpene,
17		the mixture of terpenes or the
18		liposome-terpene(s) combination is between 20 mg
19		and 5000 mg.
20		
21	22.	The method as claimed in any one of Claims 11 to
22		20 wherein the effective dose of the terpene,
23		the mixture of terpenes or the
24		liposome-terpene(s) combination is between 20
25	•	ppm and 50000 ppm in water and/or food consumed
26		by the human or animal.
27		
28	23.	The method as claimed in any one of Claims 11 to
29		22 wherein the terpene, the mixture of terpenes
30		or the liposome-terpene(s) combination is
31		prepackaged in liquid form for oral consumption
32		by humans or animals.

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24. The method as claimed in any one of Claims 11 to 1 23 wherein the terpene, a mixture of terpenes or 2 3 the liposome-terpene(s) combination is mixed with milk replacer and fed to calves and 4 piglets. 5 6 7 25. The method as claimed in any one of Claims 11 to 8 24 wherein the terpene, the mixture of terpenes or the liposome-terpene(s) combination is 9 intubated directly into the stomach of an 10 animal. 11 12 13

INTERNATIONAL SEARCH REPORT

Intel ional Application No PCT/GB 02/00015

a. CLASSIFICATION OF SUBJECT MATTER IPC 7 A61K31/11 A61K //(A61K31/11,31:045) A61K31/045 According to International Patent Classification (IPC) or to both national classification and IPC **B. FIELDS SEARCHED** Minimum documentation searched (classification system followed by classification symbols) IPC 7 A61K A61P Documentation searched other than minimum documentation to the extent that such documents are included. In the fields searched Electronic data base consulted during the international search (name of data base and, where practical, search terms used) BIOSIS, CHEM ABS Data, EPO-Internal, PAJ, MEDLINE, WPI Data, EMBASE C. DOCUMENTS CONSIDERED TO BE RELEVANT Citation of document, with indication, where appropriate, of the relevant passages Relevant to daim No. 1-5 χ BOYANOVA LUDMILA ET AL: "Inhibitory effect of rose oil products on Helicobacter pylori growth in vitro: Preliminary report." JOURNAL OF MEDICAL MICROBIOLOGY, vol. 48, no. 7, July 1999 (1999-07), pages 705-706, XP002196283 ISSN: 0022-2615 the whole document 6-10 WO 97 02040 A (BEVILACQUA MARIA ; MICHELIN 1,3-5, Χ LAUSAROT ELISA (IT); BEVILACQUA MATTEO) 7-10 23 January 1997 (1997-01-23) claims 1-4 page 8, line 9-12 page 11. line 25-30 -/--Patent family members are listed in annex. X Further documents are listed in the continuation of box C. X · Special categories of cited documents: *T* later document published after the international filing date or priority date and not in conflict with the application but cited to understand the principle or theory underlying the "A" document defining the general state of the art which is not considered to be of particular relevance invention 'E' earlier document but published on or after the International "X" document of particular relevance; the claimed invention cannot be considered novel or cannot be considered to involve an inventive step when the document is taken alone "L" document which may throw doubts on priority claim(s) or which is clied to establish the publication date of another citation or other special reason (as specified) document of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such documents, such combination being obvious to a person skilled "O" document referring to an oral disclosure, use, exhibition or other means 'P' document published prior to the International filling date but later than the priority date claimed "&" document member of the same patent family Date of mailing of the international search report Date of the actual completion of the international search 03/05/2002 16 April 2002 Authorized officer Name and mailing address of the ISA European Patent Office, P.B. 5818 Patentlaan 2 NL - 2280 HV Rijswijk Tel (+31-70) 340-2040, Tx. 31 651 epo ni, Herrera, S Fax: (+31-70) 340-3016

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